

SEASONAL INFLUENZA, COVID-19 & RSV - 2022-2023

Vaccinations for Influenza Type A & B and COVID-19:

- Patients can receive a **COVID-19** vaccine or booster and any version of the **Influenza** vaccine that is appropriate for them at the same time. If co-administered, COVID-19 and influenza vaccines should be administered in <u>different limbs</u> whenever possible.
- Influenza vaccination should be delayed in anyone with confirmed or suspected COVID-19, whether they have symptoms, until they test negative.
- A PCR test can identify both seasonal influenza type A and B viruses and SARS-CoV-2.
- A PCR test is usually not performed for RSV (Respiratory Syncytial Virus).
- Overall, healthy children are at higher risk for complications with influenza infections, compared with COVID-19 and RSV.
- There is NO vaccination for **RSV** (Respiratory Syncytial Virus). Infections are most common in children but is increasingly infecting adults.

Contagiousness of Infected Persons:

- COVID-19 and Influenza are mostly spread person to person in close contact.
- Both illnesses are spread primarily by droplets from sneezing, coughing, and talking.
- COVID-19 infection can occur via physical contact with surfaces or objects that have a virus on them and then touching the eyes, nose, or mouth.
- Influenza & RSV Most contagious during the first 3-4 days of their illness.
- **COVID-19** Most contagious 1 day before symptoms begin.
- **COVID-19** is more likely to be spread by those who are **asymptomatic**.

Time of Onset of Symptoms AFTER becoming Infected:

- Influenza & RSV typically 1-4 days
- **COVID-19** typically **2-5 days** (up to 14 days)

Common symptoms shared by Influenza, COVID-19, and RSV

- Fever
- Sore throat
- Fatigue
- Chills
- Cough
- Shortness of breath or difficulty breathing
- Runny or stuffy nose

- Muscle pain or body aches
- Headache
- Vomiting
- Diarrhea
- Ageusia (loss of taste) more common with COVID-19 than with influenza.
- Anosmia (loss of smell) more common with COVID-19 than with influenza.

Complications of Infection:

- **Influenza** Conditions that carry and increased risk for complications:
 - o Age younger than 2 years
 - o Asthma
 - o Neurologic and neurodevelopmental conditions
 - Blood disorders
 - o Chronic lung disease
 - Any endocrine disorders
 - Heart disease
 - Kidney disease
 - Liver disease
 - Metabolic disorders
- **COVID-19** specific conditions that increase a person's risk for severe illness:
 - Chronic kidney disease
 - o Type 2 diabetes
 - o Chronic obstructive pulmonary disease
 - Obesity (body mass index of 30 or more)
 - o Immunocompromised state from solid organ transplant
 - o Serious heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
 - Sickle cell disease

Prevention of Infection:

- Avoid crowds, especially indoors
- Practice consistent proper hygiene wash your hands, avoid touching face, etc.
- Masks when exposure is possible:
 - o Regular 1-2 ply masks will filter airborne particulate matter, but **not** viruses
 - o M-95 masks are triple-ply and will trap both the influenza and COVID-19 viruses
- Consider: "Immune System Boost Maintenance Dosing"

Treatment - Out-Patient:

- All symptomatic patients should review and initiate the supplement recommendations listed on "Acute Respiratory Infection".
- Patients with suspected infection should have a PCR test that can identify both seasonal influenza type A and B viruses and SARS-CoV-2 to determine if any prescription therapy is indicated.
- There is no prescription therapy for **RSV** infection, only symptomatic.

• Influenza PCR Test - Positive:

- Rx: Tamiflu (oseltamivir) Inexpensive
- **Rx: Xofluza** (baloxavir marboxil) 40 or 80 mg tab. Single Dose.
 - o \$150 cash. Coupons available online
 - o Must be started within 48 hours a short window to get a positive PCR test.

• *COVID-19 PCR Test* - Positive:

- Treatment with monoclonal antibody prescription. Must be started within 5 days from onset of symptoms to be effective.
- o **Paxlovid** (nirmatrelvir 150 mg / ritonavir 100 mg) Pre-packaged with 30 tabs
- o Lagevrio (no generic) 200 mg. 40 tablets

Treatment – Hospitalized Patients:

- **Remdesivir** (Tocilizumab), an interleukin 6 (IL-6) inhibitor, is a *monoclonal antibody* that is administered I.V. and has demonstrated a clinical benefit in certain patients with a dysregulated immune response due to COVID-19 and in patients with both COVID-19 and influenza. It has also used to treat mild to moderate COVID-19 in non-hospitalized patients who are at high risk for progression to severe COVID-19 (e.g., hospitalization, death).
- **Corticosteroid**s, used to treat severe COVID-19, may be associated with poor outcomes in patients with influenza. However, dexamethasone has demonstrated substantial benefits for patients with COVID-19 who are hospitalized and require supplemental oxygen.

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